

LICENSE APPLICATION FOR HEALTH CARE INSTITUTION AND REQUIRED ATTACHMENTS CHECKLIST

RENEWAL

Your license application packet must include the following:

- ☐ Notarized License Application For Health Care Institution
- ☐ \$50.00 Application Fee (Please include license number of facility/agency)
- ☐ License Fee
- ☐ Services and Staffing Provided Form
- ☐ Current Fire Inspection Report
- ☐ Resume for Administrator
- ☐ Lease Agreement (if applicable)
- ☐ Board of Directors or list of Officers of the Corporation
- ☐ Bed Count (if applicable)
- ☐ Accreditation Report and Cover Letter (if applicable)
- ☐ Current Food Service Report (if applicable)
- ☐ Roster for T.B. and Fingerprinting for the current 12 months of Home Health Agency staff.

NOTE:

1. DO NOT use correction fluid or correction tape on the license application. Applications must have original signatures. Photocopies of signatures will not be accepted.
2. The Application Fee must be made payable to the Arizona Department of Health Services. Please include the license number of the facility/agency.
3. Accreditation Report must be from a Nationally Recognized Organization; such as: i.e.; JCAHO, AAAHC, AOA, CARF, AAASF, AABB, ASHI, COLA, CAP and CHAP. The report must include all surveyed locations.